

DUBLIN PARK FACILITY FEE AND RENTAL CONTRACT

Effective April 15, 2002 the fees listed below will be charged for the use of the Dublin Park Facility. All request for reservations are first come, first serve and request will be granted based on availability of areas requested for use. The City of Madison Parks And Recreation Department has the right to refuse to reserve to anyone or any group upon their discretion. All persons or organizations requesting use of the facility will be responsible for set up and clean up of any and all areas used. All fees must be paid in full upon completion of reservation form. Fees will be charged according to the times reserved and persons and/or organizations that do not vacate the areas reserved on time will be charged an overtime fee based on the length of time gone over. Cancellations must be submitted in writing to the Facility Scheduler at least 72 hours in advance, unless due to an emergency. Refunds will only be issued if the cancellation process is followed. Any persons or organizations reserving the facility will be held responsible for any and all damages to areas reserved and any special equipment used. **A Damage Deposit of \$50.00 will be charged for use of any special equipment and must be paid prior to use of requested equipment.**

ABSOLUTELY NO ALCOHOLIC BEVERAGES ALLOWED

Party Package:

\$ 50.00

2 hours of swimming/basketball/volleyball (during open swim/play)
for 15 guest and 1 meeting room for 1 hour.
Each additional guest will be charged \$3.00

Full Gymnasium Entire Day

\$400.00

Full Gymnasium Hourly

\$100.00

1/2 Gymnasium Entire Day

\$200.00

1/2 Gymnasium Hourly

\$ 50.00

Indoor Pool Entire Day

\$300.00

Indoor Pool Hourly (2 hr. minimum)

\$ 75.00/hour

Meeting Rooms

Civic Rate

Regular Rate

1 Meeting Room Hourly

\$20.00

\$25.00

2 Meeting Rooms Hourly

\$30.00

\$40.00

3 Meeting Rooms Hourly

\$40.00

\$50.00

Kitchen Hourly

\$10.00

\$10.00

Special Equipment: Television w/remote, Video Cassette Recorder, Overhead Projector w/screen, Large Wipe Board w/Marker Set, Chalk Board w/Chalk & Eraser and/or DVD Player

Name of Applicant _____

Purpose of Reservation _____

Street Address _____

City _____ State _____ Zip _____

Phone _____ Business/Cell Phone _____

Email Address _____

Area Requested _____ Date _____ Time _____ Total Fees Due _____

Signature of Applicant _____ Date _____

Facility Representative _____ Date _____

FOR OFFICE USE ONLY

Swim Time _____ Swimmers _____ Pool Approval _____ Gym Approval _____

Special Instructions _____

Deposit Paid _____ Check No. _____ Cash _____ Receipt No. _____

Total Paid _____ Check No. _____ Cash _____ Receipt No. _____